

THE
DISEASES OF

Diseases of

EFFECTS OF ANCESTRY

SCROFULA

CONSUMPTION

BY THOMAS

LONDON

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OBSERVATIONS

ON THE

Diseases of the Liver,

AND ON THE

EFFECTS OF MERCURY IN THEIR TREATMENT.

WITH SOME ACCOUNT OF THE

SCROFULO-SCHIRRUS;

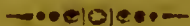
OR,

CONSUMPTION OF THE LIVER.



By THOMAS MILLS, M. D.

Licentiate of the College of Physicians,
One of the Physicians of the House of Recovery and Fever-
Hospital in Cork-street, and of St. George's
Dispensary and Hospital.



Dublin.

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1811.

Diseases of the Liver

LECTURES DELIVERED BY JOHN THOMAS, M.D.

OF THE UNIVERSITY OF CAMBRIDGE

IN THE YEAR 1843

CONSUMPTION OF THE LIVER

BY JOHN THOMAS, M.D.

LECTURE DELIVERED AT THE UNIVERSITY OF CAMBRIDGE
ON THE PROGRESS OF THE DISEASE OF THE LIVER
AND ITS CONSEQUENCES, AND ON THE TREATMENT
OF THE DISEASE, AND ON THE PROPHYLAXIS

By John Thomas, M.D.

LECTURE DELIVERED AT THE UNIVERSITY OF CAMBRIDGE

ON THE PROGRESS OF THE DISEASE OF THE LIVER

AND

ON THE PROPHYLAXIS OF THE DISEASE

1843

TO

ROBERT PERCEVAL, ESQ. M. D.

Lately Professor of Chemistry in the

University of Dublin,

&c. &c. &c.

DEAR SIR,

I dedicate to you the following Pages—as
a Testimony of Esteem for your Talents and
Philanthropy—and, as a Tribute of Gratitude, for
the various and valuable Information derived from
you, in the course of my professional Duties.

I remain with respect,

Your obliged and faithful

THOMAS MILLS.

Dominick-street.

THE HISTORY OF THE

REIGN OF

CHARLES THE FIRST

BY

JOHN BURNET

OF THE UNIVERSITY OF OXFORD
IN TWO VOLUMES
THE FIRST
CONTAINING THE HISTORY OF THE
REIGN OF CHARLES THE FIRST
FROM HIS MARRIAGE TO HIS DEATH
IN THE YEAR 1649

LONDON

PRINTED BY J. STURGEON

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ERRATA.

<i>Page.</i>	<i>line.</i>		
4	2,	for <i>scropulo</i>	read <i>scrofulo</i> ;
	9,	<i>do.</i>	<i>do.</i>
10	1,	<i>of sternum</i>	of the sternum,
14	15,	<i>congertion</i>	congestion.
20	25,	<i>mexentery</i>	mesentery.
23	5,	<i>annuly</i>	annually.
33	23,	<i>turbercles</i>	tubercles.
34	8,	<i>tousillaris</i>	tonsillaris.
36	1,	<i>treatmen</i>	treatment.
	3,	<i>to</i>	of
	5,	<i>more so</i>	greater.
41	11,	<i>and may</i>	and this may.
49	20,	<i>exhilirated</i>	exhilarated.
62	16,	<i>for better than</i>	for more than.
81	2,	<i>netral</i>	neutral.
85	20,	<i>with this medi-</i>	} he tired of this medicine.
		<i>cine he fell out</i>	
89	91,	<i>for better</i>	for more.

PREFACE.

THE observations contained in the following Essay, are the result of experience and reflection.—My information is derived from a long and laborious attention to dispensary, hospital, and to private practice.—In so ample a field for acquiring medical knowledge, I have had repeated opportunities of witnessing disease in a great variety of shapes, and of watching the effects of our approved remedies.—Affections of the Liver have engaged much of my attention; from cases of this description I have selected such as seemed necessary to illustrate the subject, and to confirm the opinions advanced.—These cases are given with all possible brevity; their characteristic features and the obvious effects of the medicines are alone kept in view, accompanied by remarks on the constitution of the patient and family as often as any information on this head could be satisfactorily acquired. Mercury is, now-a-days, the almost sole remedy exhibited in the cure of all Liver and Bilious Complaints; to this remedy, in the present investigation, a fair and full trial has been given, the result of which is particularly specified in the following pages.

B

I have

as fluctuating and uncertain as the fleeting modes and vaporish whims of the day. But other ages as well as this, have had their prepossessions in favour of particular maladies and remedies, and their prejudices against others, and on no better foundation than that of fashion or caprice.—At the present day it is the custom to speak familiarly of nervous and bilious diseases, and to comprehend under one of these titles every deviation from health, and in the treatment of the latter mercury has become the reigning favourite—the indefinite use of such epithets, leads to as indefinite a practice, and the prevalent administration of mercury to evils the most serious and alarming.

The different organs of the body are appropriated to the performance of different functions; these organs are numerous, their functions manifold, and on their mutual and combined operations depend the harmony and well-being of the whole; the sound condition of some is more immediately necessary to our existence than that of others, the derangement of any brings on disease, and the due equilibrium of all constitutes health.

The Liver, of the disorders of which I am about to treat, is a secretory organ of the first magnitude, covered with membranes and composed of arteries, veins, nerves, lymphatics, glands and excretory ducts, joined together by cellular texture;—it is situated immediately under, and

is closely connected with the diaphragm, filling up the whole of the right hypochondriac, and part of the epigastric region; it is divided into three lobes, the right, left and central, or a very large one, a much smaller and a still less; it is intimately united with the stomach and intestines, by means of blood-vessels, absorbents, nerves, ducts and membranes, and is destined for the secretion of bile, a fluid necessary to chylification, and to the expulsion of the fœces:—the gall bladder is attached to the concavity of the great lobe, is joined to the duodenum by the cystic and common ducts, and is appropriated to receive a part of the bile, and to fit it for its due purposes.—One striking peculiarity belongs to the Liver, the bile is secreted from venous blood by the convoluted extremities of veins, whereas in all other secretory organs, the fluid secreted is produced from arterial blood, and by the convoluted extremities of arteries.—It is also worthy of remark, that the blood going to the Liver for the purpose of secretion, is collected from the veins of the chylopoietic viscera;—this general view of the anatomy and office of the Liver is sufficient to point out the connexion which subsists betwixt this viscus, the stomach and intestines, and it shews how much these three organs may be influenced one by the other, in the exercise of their respective functions.

The Liver is subject to many varieties and degrees of disease: Authors enumerate, inflammation, acute and chronic,

chronic, abscess, jaundice, schirrus, biliary calculi, turbercles, hydatids, worms and earthy concretions; to this list may be added, cancer, scrofulo-schirrous or consumptive Liver, (a common complaint of this country) and simple enlargement, hardness or softness. Jaundice, for reasons to be given hereafter, appears to me to be here misplaced, and with regard to chronic hepatitis, it is too generally considered as a disease distinct from the acute species, which leads to a contrary and mischievous practice.

If the hepatic vessels be preternaturally excited, if they lose their wonted powers of action or assume a morbid one, if the gall-bladder or ducts be inflamed, over-distended or obstructed, disease in some shape presents itself, diversified in appearance, but still more in its consequences. In this kingdom the chronic affections, low inflammation and scrofulo-schirrus or consumption of the Liver, are most prevalent, their commencement is insidious, because not marked by any characteristic symptoms, and their progress towards the confirmed stage though slow, is sure, and when this is once formed, they become inveterate and dangerous.

Chronic hepatitis is; perhaps, entitled to our first consideration, from the frequency of its occurrence, from its being often over-looked, confounded with, or mistaken for complaints of the chest, stomach or intestines, and from
its

its calling into action disorders which might otherwise have lain dormant. In the description of this disease writers dwell principally on the pain in the region of the Liver, increased on pressure and occasionally shooting towards the right shoulder, accompanied by a slight fever, and a sense of weight or uneasiness of the right hypochondre, especially when the patient lies upon the left side; and these symptoms, it is true, characterise the disease, but it is then advanced or confirmed, when our efforts to check its progress too often prove unavailing; this history, therefore, is imperfect, because the symptoms of the first stage are unnoticed, a knowledge of which is necessary to obviate the occurrence of the second, and to prevent the rise of more dangerous affections.

In most instances, the natural functions are first disturbed, a diminution or depravation of appetite ushers in the complaint, attended by flatulency and uneasiness of stomach and bowels, and by eructations, bitter, sourish or otherwise offensive; diarrhoea sometimes occurs, constipation frequently, accompanied by tormina or tenesmus; a sensation of heat and weight rather than of pain of abdomen commences with, or supervenes to the above symptoms; this sensation is referred to the right or left hypochondre, to the epigastric or hypogastric region, or, to the loins or sternum;—a teasing cough and mucous expectoration are mostly present, dyspnœa is felt on slight exercise;

exercise ; symptoms which, coupled with the uneasiness of sternum, may deceive both patient and practitioner, by giving rise to the idea that the lungs are the seat of the primary affection ; the fœces are brownish, greyish or slate-coloured, and vary as to consistence, from the dry hardened scybala, to a fluid thin as water—the urine is occasionally limpid and abundant, more commonly turbid and deficient, depositing a mucous or jelly-like matter, reddish or yellowish ; the pulse is frequent, and the skin hotter than natural ; the tongue cream-coloured and viscous ; acids and cold drinks are wished for, and are found refreshing ; slight chills are diffused over the surface, and the countenance is expressive of languor or oppression ; the complexion is pale or sallow, the face occasionally flushed, accompanied by a sense of fulness or weight of head, proceeding at times to acute head-ach, and often followed by drowsiness and an unwillingness to make the ordinary exertions of either mind or body ;—such are the symptoms which commonly denote the presence of the first stage of chronic hepatitis, which is of varied violence and duration ; at length it is succeeded by fixed and frequently shooting pains throughout the region of the Liver, and by the other signs termed pathognomonic.—If the inflammation thus far advanced, be disregarded or overlooked, if our remedies be inefficacious, new symptoms, indicative of further changes in the œconomy of the Liver and of the whole frame, are exhibited—

hibited—in the vigorous and athletic, one or more abscesses are formed; in others, the parenchymatous substance is loaded with effused fluid, and enlargement or hardness, or schirrus with the growth of new solid matter, supervenes;—in the strumous habit tubercles are generated, and scrofulo-schirrus or consumption is excited.—But these are not the only consequences which proceed from chronic hepatitis:—the liver is obstructed, the secretion of bile diminished, venous plethora follows in the remaining chylopoietic viscera, to which succeeds arterial plethora of the whole system; hence arise hemorrhagies, both venous and arterial from the bowels, stomach, liver, lungs, kidneys, nose, gums, or ears—the same complaint produces likewise anasarcaous swelling, or effusion into the cavities of the abdomen or thorax; and in those predisposed to phthisis pulmonalis, the pulmonary congestion induced, brings on cough, dyspnæa, hemoptysis and purulent expectoration; and thus, consumption of the Liver is frequently combined with a similar disease of the Lungs.—But should the thoracic and abdominal viscera be sound, some weaker part may suffer, as the head, whence hydrocephalus internus, or rupture, or over-distension of blood-vessels and sudden death;—it would be difficult, perhaps, to trace further the effects flowing from chronic hepatitis when neglected or overlooked; enough has been said to point out the insidious and dangerous tendency of the disease, and to shew the advantages of dividing it

C

into

into two stages, for the views of the physician will be thus directed, not merely to the removal of the affection of the alimentary canal, but of the cause in which this affection so often originates: and that great derangement of the stomach and intestines proceeds from over-excitement of the hepatic vessels, is certain; because such derangement uniformly attends such excitement, because the fever which accompanies inflammation of less important organs, disturbs the digestive process, and cases daily occur where the reason now ascribed for such derangement exists and no other, moreover, the sympathy and connexion subsisting between these viscera render a morbid action of the one incompatible with the healthy condition of the others.

The causes of this complaint are various—it proceeds from violent exercise, accidents, the stronger passions, anxiety of mind, excessive heat, suppressed perspiration, excess in eating and drinking, constipation, schirrus, fever continued and intermittent, and from inflammation of the neighbouring viscera. Of these causes, one of the most common in this country, seems to be anxiety of mind. This complaint is often confounded with that named *Dyspepsia*, when the medicines usually administered must aggravate its violence; such are, chalybeates, bitters, astringents, sulphuric acid, &c. &c. &c; and though it must be owned, that appearances at the onset

of chronic hepatitis are ambiguous, and that it is difficult to draw a line of distinction betwixt its early stage and dyspepsia, yet a just diagnosis may, perhaps, be formed, by holding in view the following symptoms, which usually accompany the former—feverish pulse and skin, depressed spirits, changed complexion, and the preternatural appearance of the fœces and urine. In the treatment it might be supposed that no diversity of opinion could exist—the disease is inflammatory, and acknowledged to be so, and sedatives and evacuants are alike indicated, and prove as beneficial in inflammation of this organ as in that of any other.—Of late years, however, a new theory has been suggested and acted on, and mercury is, now-a-days, administered as a specific, and the evacuating plan laid aside—this practice is founded on the authority of the practitioners of the East-Indies, and has been thence transferred to these countries.—On this subject I shall treat hereafter; in the mean time I proceed to mention that plan of treatment which I conceive to be most effectual.

The employment of our remedies must be regulated, not merely by the violence, but the obstinacy, of the symptoms—in some cases, purgatives and diluents with a spare diet, are sufficient, in others, the tepid bath and Ipecacuanha or antimonials become necessary--if these fail, immediate recourse should be had, even in the incipient stage, to blood-letting or blistering, or to both; for chronic hepatitis often produces

produces its worst consequences undistinguished by the presence of any acute symptom: and when we reflect on the little sensibility of the great mass of the Liver, on the slow and insidious tendency of the disease, on the danger of neglecting it at its commencement, and on the safety with which blood-letting may be had recourse to, it will appear evident, that this and other evacnants are employed with too much caution,

Cathartics should be freely given in the first instance—they are peculiarly well-adapted to the relief of this complaint, by unloading the bowels, and by abstracting a large portion of fluids from the numerous exhalants of the alimentary canal; the consequence is, that the usual flow of blood into the vena portarum is diminished, the congestion in the liver lessened, and a chief predisposing and exciting cause removed.—Local blood-letting is sometimes attended with decisive, always with considerable advantage—it diminishes congestion, and lessens and changes the action of inflamed vessels—ten or twenty leeches applied for two or three days successively, may afford so great ease as to do away the necessity of taking blood from the arm, and where the patient is of a weak and irritable habit, and a low degree of fever only is present, this evacuation should be tried before we resort to the lancet.—Blisters prove in some instances eminently serviceable, in others, they are of no avail—they operate most effectually when applied early—by stimulating the superficial vessels

vessels, they lessen the activity of those that are deep-seated, and by the derivation of fluids they occasion towards the surface, they serve to diminish inflammatory congestion.—But this is not the only way in which they are useful: a diseased action subsists, a blister makes a contrary impression, a counter-movement is thus produced, and the diseased action overpowered.—In obstinate cases, not yielding to the use of the above remedies, general blood-letting becomes necessary; the first bleeding should be moderate, six, eight, or twelve ounces may answer the purpose, though local blood-letting to the same, or even to a greater amount may have failed; for, the relief thus afforded does not solely depend on the quantity of blood drawn off, but on the change induced in the state and mode of acting of the inflamed vessels—an effect often observed to follow a moderate general bleeding in obscure inflammation of the lungs in debilitated habits, and which may serve to convince the most timid practitioner of the safety and utility of the judicious use of the lancet, in a similar condition of the liver.—With a view to illustrate this doctrine, and to shew how far it is practically beneficial, I have selected, out of many, the following cases:

CASE.

In June 1809, I visited Miss B. 22 years old, of a sanguine temperament;—she had complained for some weeks

weeks of a diminished appetite, and of a sense of weight and uneasiness in both hypochondria—the bowels were irregular, and the fœces and urine preternatural; the complexion had changed from a pale to a sallow colour, and her usual flow of spirits was much abated; the pulse was more frequent than natural, and there was slight thirst and heat of skin:—the menses were regular.—Purgatives afforded relief, but did not cure—a blister was applied upon the part affected, and the sedative regimen adopted—ease was obtained, but the complaint continued; ten ounces of blood were taken from the arm—it had the inflammatory coat—this evacuation, with a low regimen, removed the disease.—Here was an instance of chronic hepatitis in its first stage, undistinguished by any acute symptom, resisting the use of purgatives and the effects of a blister, and yielding at length to general blood-letting—the complaint was apparently brought on by anxiety of mind.—The parents of this young lady were healthy.

CASE. A gentleman about 25 years old, was attacked with acute hepatitis and flux, shortly after his arrival at Bombay; leeches and blisters were applied upon the region of the Liver—calomel in large doses was given as a purgative, and from two to three drams of mercurial ointment were rubbed in daily, until the gums became sore—the violent symptoms were removed, but slight fugitive pains in the right hypochondre still continued, accompanied

accompanied by cough, dyspnæa and emaciation;—these complaints were caused by intemperance in drinking and subsequent exposure to the night dew;—he was sent home for the re-establishment of his health.—On examination, the right lobe of the Liver was found to be enlarged and hardened, and was pained on pressure—he complained of thirst, of uneasy bowels, and of a disagreeable taste in his mouth—mercury was ordered in consultation, on the ground of its specific power;—the system was shortly affected, salivation ensued, no relief followed; on the contrary, the painful sensations were rather aggravated, attended by hectic fever, and a still further waste of flesh and strength—the mercury was discontinued, leeches and blisters were applied in the neighbourhood of the Liver; the tepid bath was employed, and he was put on the mild purgative and tonic plan—in the course of some weeks he was considerably relieved.—A cure could not be expected, the constitution was scrofulous, the Liver tuberculous—in this patient, acute hepatitis subsided into the chronic, and the inflammatory action, combined with the mercurial, excited scrofulo-schirrus or consumption of the Liver, in which this gentleman's diseases finally terminated, an event that might probably have been obviated by general blood-letting, if judiciously employed in the first instance.

CASE.

CASE. A gentleman of hale constitution, in the vigour of life, complained of shooting pains throughout the right hypochondriac and in the epigastric regions, attended by a low irregular fever—the blue pill was given, and two scruples of the mercurial ointment were rubbed in nightly upon the side affected, he was put on a full diet, and a pint of wine was allowed daily to promote the operation of the mercury—at the expiration of a week the gums were affected, but the pain of side became more acute, and febrile symptoms set in, accompanied by gripes and general soreness of the abdomen—such were the consequences of the mercurial action and of the full regimen—the symptoms indicated the necessity of a change of treatment.—Twelve ounces of blood were taken from the arm—twelve leeches were applied in the vicinity of the part affected, purgatives were freely administered and the sedative regimen adopted;—by following up this plan, the disease was finally removed.—A long fatiguing journey and mental anxiety were the causes to which this complaint was ascribed.—This gentleman, in the first instance, was attacked with chronic, to which succeeded acute hepatitis, the effect of the stimulating powers of mercury and of the heating regimen.

CASE. In March 1810, I prescribed for a lady who had been ill several weeks of low inflammation of the right lobe of the Liver—the skin and tunica conjunctiva of

CASE.

the eye were slightly yellowish—the digestive organs were much deranged, and fugitive pains throughout the thorax were often complained of—mercurials and blisters had been administered without advantage—leeching and purgatives, the tepid bath and warm clothing afforded considerable relief, but her convalescence was tedious.—This lady was of a delicate irritable frame, her constitution was scrofulous, and she had suffered considerably from childbearing.—Her mother had fallen a victim to pulmonary consumption.

CASE.—I was consulted last spring by a gentleman, naturally of sound constitution and born of healthy parents, who had resided ten years in the East-Indies, where he was seized with acute hepatitis and dysenteric symptoms—he was blistered, purged, bled and mercurialised; his convalescence was tedious—the constitution was impaired—a sea voyage, and a trial of his native air, were therefore recommended.—On his return he laboured under chronic hepatitis accompanied by jaundice and some enlargement and hardness of the right lobe of the liver;—as this patient was feeble and emaciated, it was thought adviseable, in the first instance, to apply leeches in the neighbourhood of the part affected, and to make trial of the saline purgatives, the tepid bath, and a light nutritious diet.—After three months, observance of the above plan, the induration

of the Liver was removed, the digestive organs recovered their tone, and the general health was re-established.—Of this case, I shall observe, that the prejudicial effects of the mercury were, in some degree, counteracted by the other remedies employed, and by the inherent powers of a sound constitution.—The Liver was neither altered in structure nor scrofulous, from which I conclude, that if mercury had been administered in the second instance, and due attention paid to keep up the full action of the intestines, the probability is, that the same favourable result would have taken place, when the cure would have been undeservedly ascribed to the action of this remedy.

ACUTE HEPATITIS differs from the chronic only in degree; the pain is more violent, the fever higher, and the affections of the adjoining parts, whether sympathising with the primarily disordered viscus, or participating in the consequences of its disease, are proportionally more severe.—If, for example, the inflammation lay hold of the convex side of the Liver, the lungs and diaphragm may become engaged to an alarming degree; hence, cough, difficulty of breathing, pain of the chest hiccup, &c.—If, of the concave, it is accompanied by some disturbance or inflammation of the stomach, bowels, mezentery, peritoneum, or pancreas, hence, proceed præcordial anxiety, nausea, vomiting, shooting pains in the epigastric or hypogastric region, twisting
of

of the umbilicus or dysenteric symptoms—at times, it is combined with, and at others mistaken for, pneumonia, gastritis or enteritis, and it must be confessed, that it is not easy, on all occasions, to draw the line of distinction; nor is it, perhaps, of any great moment; for inflammation is still the complaint to be combated, and whatever injury the practitioner may sustain from not forming a correct diagnosis, none can happen to the patient, if the plan of treatment pursued be anti-inflammatory.

Acute hepatitis seldom appears in this kingdom—frequently within the tropics—some consider it as a disease *sui-generis*, and as peculiar to the East-Indies—like other inflammations it terminates by resolution or suppuration—the latter often occurs in the East-Indies, West-Indies and Africa, which may be ascribed, perhaps, to the mode of treatment, and to the influence of a powerful predisposing cause, I mean, the long continued action of an overheated atmosphere.—The occasional causes are the same as in the chronic, violent exercise, intemperance in the use of wine or spirituous liquors, exposure to the rays of a vertical sun, especially if the head be uncovered, &c.—The treatment of acute hepatitis is so similar to that of the chronic, which we have already considered, that it will not be necessary to speak of it at great length; I shall only observe, as the disease assumes a more alarming appearance in the acute, our
active

active remedies are to be more speedily and fully administered:—Such are, blood-letting, general and topical—purgatives, blisters, joined with diluents, antimonials, emollient injections and the sedative regimen.—In opposition to this received and successful mode of practice, another has, of late years, been introduced and generally adopted within the tropics, and thence transferred to more northern latitudes.—This mode consists in the exhibition of large quantities of mercury by inunction or pill, in order to excite a new action in the constitution, and to counteract the existing diseased one;—how far this plan is judicious or injurious, is deserving of examination.—The advocates for the use of mercury rest their argument on the ground of the peculiar nature of the Indian Hepatitis, and the specific powers of the remedy;—they likewise maintain that it possesses the same properties in the cure of the chronic hepatitis of this and other colder climates.

By a specific is understood a remedy, whose virtues in curing a particular malady, are certain and incontrovertible though inexplicable;—such virtues are manifested by peruvian bark in intermittents, by mercury in syphilis, and by sulphur in the itch.—Let it now be asked, does mercury possess the same powers in removing the acute hepatitis of the East-Indies, and the chronic of these countries as the above remedies in the several diseases mentioned? Facts alone can determine this question, and facts are to be found in the medical reports

ports and writings of every practitioner in India, sufficient to convince the warmest friend of mercury, that it has not the virtues generally ascribed to it.—From these it will appear, that though mercury be freely and fully administered, many fall victims annually to hepatitis, and many more are invalided from its consequences—schirrus, flux, abscess and hectic fever; some of these invalids, on their arrival in their native country, are happily rescued from the grave, by the natural efforts of a healthy constitution, and others, by the use of Cheltenham water and a fit regimen:—Indeed, without recurring to the experience of these medical gentlemen, we will find in London, Cheltenham, and even in this City, several living, or rather dying witnesses, to prove that mercury is no specific in this complaint.—I have been favoured with a view of the Journal of Mr. James Adams, a gentleman of Judgment and Observation, and late assistant Surgeon to the 2d Ceylon regiment during the years 1806 and 1807—from this Journal I have made the following extracts:—The European corps in 1806 consisted of 2248, in 1807 of 2036 effective men, of whom died—

In 1806,	In 1807,
8 of Fever,	7 of Fever,
31 Liver complaints,	28 Liver Complaints,
9 Flux,	16 Flux,
7 Beriberri,	1 Beriberri,
3 Dropsy,	1 Pulmonic,
6 Surgical cases,	2 Surgical cases,
3 Apoplexy,	7 Apoplexy,
30 Invalided,	35 Invalided.

Under

Under the term Liver-complaints, is comprehended hepatitis, acute and chronic.—Flux often proceeds from some deranged biliary action, and most of those invalided, had laboured under hepatitis or its consequences, which Mr. Adams chiefly attributes to intemperance in drinking, and subsequent exposure to the rays of a vertical Sun, or to the night dew.—The natives (with the exception of such as are addicted to the use of spirituous liquors) suffer but little from Liver complaints, owing to their abstemious mode of living, but they often fall victims to dropsy and to pulmonic and bowel disorders.—In the numerous cases of diseased Liver now stated, mercury was exhibited with an unsparing hand, yet the fatality appears to have been truly alarming, and sufficiently shews that if it were not injurious, it is not, at least, entitled to the appellation of a specific.

Mr. Adams observes, that in various instances it proved beneficial, but as no register was kept of each case distinctively, nor of the numbers attacked, I cannot speak of the proportion of deaths to recoveries, nor of the circumstances under which it was prescribed with advantage—that many patients have recovered and will recover from hepatitis who have taken mercury, no one will question—such recoveries, however, are no proof that the remedy was either safe or useful, they rather shew, that improper medicines may, at times, be given with impunity; that their mischievous properties will, on some occasions, be coun-

counteracted by the efforts of nature, and, on others, by the operation of the remedies with which they are conjoined ; a fact daily witnessed in the treatment of this and several other diseases.

It is somewhat singular that writers and practitioners should still persist in maintaining the specific virtues of a medicine in a disease which it not only often fails to remove, but often aggravates ;—it will appear equally singular, and indeed somewhat contradictory, that some of these practitioners who speak of mercury as possessing powers in hepatitis equal to those it exerts in lues venerea, should employ blood-letting and other evacuants, when the symptoms are most urgent, and as soon as the violence of the inflammation has been thus abated, have recourse to mercury, when it can only be considered to serve as an auxiliary.—Mr. Curtis, one of the advocates for mercury, in his work on the diseases of India, observes, that moderate bleeding was sometimes practised, but “whether bleeding or blistering were employed, it was always of consequence to clear the bowels and to carry down the diseased secretions by a purgative or two.” Again, he says, “as soon as the pain of the side, heat and fever had been a little abated by the use of Crystals of Tartar, Nitre, Manua and Salts, Mercury was immediately had recourse to, and the course pushed on as quickly as possible without any regard to the

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the state of the bowels.”—In another place he remarks, “ whenever the disease came on with a considerable degree of fever, with acute and constant pain in the side and shoulder, some bleeding was practised : but in other cases it was never done ; and indeed to the extent to which it could well be carried in a warm climate, and in relaxed habits, it seldom procured much relief.” This observation is deserving of notice—it shews that blood-letting, when employed, was not carried to a sufficient length, from an ill-grounded apprehension of the debility which might follow.—Again, he says of mercury, “ Its good effects in every species of Liver disease, except in the state of ulceration and simple disorder of its secretion, viz. simple bilious fever and flux, were so apparent, that we had recourse to it with the same confidence as in the lues venerea,” though he allows that many died under the treatment, and that in some cases it was necessary to premise blood-letting or blistering, or both.—In the same paragraph he says, “ *scarcely* was it ever observed to increase the heat and fever, or, to aggravate the pain of the side or cough ;” an observation which distinctly implies that the learned Author, with all his partiality for mercury, had discovered that it *sometimes* aggravated the symptoms of acute hepatitis.—Mr. Paisley, a gentleman who places much confidence in the powers of mercury, says, in his remarks on the Liver-cough, “ this disease, like all other inflammations of the Liver, is very tractable

tractable in the beginning by evacuations, relaxing antiphlogistic medicines and mercury.”—“In acute diseases, evacuations, neutral salts and relaxing medicines render it safe and effectual.”—Dr. Duncan, in his letter to Dr. Saunders on the prejudicial effects of mercury when improperly administered, remarks, “from what I have stated you may naturally ask how I managed with hepatitis in the field, when I was so cautious of giving mercury in syphilis?—but, here, in fact, I had no choice; the urgency of the disease admitted of no delay. I gave mercury with all the care and precaution that circumstances would allow.” When the disease was most urgent, the Dr. considered mercury as the chief, the specific remedy—that the disease, however, proved fatal under its administration, and that he had recourse to other medicines will appear from what follows:—“Though I have seldom observed that the hepatitis, in India, when it is taken early and treated properly, proves fatal, yet a case now and then does occur in which there appears so strong a tendency to suppuration from the commencement, that this event cannot be prevented by the speediest and most efficacious means hitherto known.—Some cases I have met with where abscesses were formed in the interior of the liver notwithstanding the use of mercury, bleeding, &c.”

Dr.

Dr. Lind, in his work on the diseases of hot climates, seems to consider mercury rather as an auxiliary than as a principal in the treatment of acute hepatitis.—Dr. Saunders, a name of high authority, both as a writer and practitioner, speaking of the action of mercury, says—“ I am disposed to believe that where its action is specific, as in syphilis, hepatitis, and the hepatic fluxes of India, the inflammation of the gums with a slight salivation, is the best criterion of its salutary operation.” Here, hepatitis and syphilis are classed together as diseases curable by mercury—that it is a specific for the latter, is proved by daily experience, that it is none for the former, is manifest from the mortality which has been shown to attend its exhibition—But Dr. S. must either grant that it possesses no power over the complaint, or that it is injurious at a period when specifics are always employed and prove beneficial, for he limits its use to that stage at which the alarming symptoms have subsided, and when from the usual effects of the remedies first administered, and from the time allowed to elapse before the introduction of mercury, there is reason to conclude that the disease is removed, at least so much abated as not to require the aid of a specific—He says, “ When the accession of the disorder is attended with much fever and local pain, (which is not always the case) the lancet is resorted to immediately; but some caution is required in the

use of this powerful evacuant. Purgatives are always essential—Blisters also are invariably serviceable when the local affection is severe. After these means have been used for about two days, the mercurial course is begun without delay, &c. &c.”—And to shew that no difference of opinion subsists as to the word specific, I beg leave to quote the words of Dr. S.—“But it should never be forgotten, that the idea of a specific is peculiarly flattering to the patient, for whilst it encourages an implicit reliance on a *single remedial process*, &c. &c.”

It is unnecessary to proceed further to shew that the specific virtues ascribed to mercury in hepatitis are merely imaginary—but laying aside this question, it is of moment in the present inquiry, to recollect that the symptoms by which the disease is characterised are inflammatory, and that mercury is a stimulating remedy; now stimulants produce inflammatory diseases or aggravate their violence, sedatives therefore, and not stimulants are here indicated—in opposition, however, to the principles which regulate the treatment of inflammation, and to the mode of operation of this supposed specific, numerous advocates still come forward to support the cause of mercury—some give it at the commencement and throughout the progress of the complaint, and assign as a reason, that if the system be acted on and salivation succeed, the cure will be accomplished: granting so much by way of argument,

ment, it may be observed in answer, that acute hepatitis is sudden in its attack, rapid in its progress, and dangerous in its tendency—such is the disease—mercury, in exciting salivation or affecting the system is, at one time, tedious, at another, speedy, but, in every instance, uncertain—such is the medicine;—the inference is obvious, in one case, the patient may be lost before the mercurial action is excited, in the other, salivation may succeed before the system is acted on—shall we then in the exercise of our art, resort to a medicine, at best, of doubtful promise, in a rapid and dangerous disease, when more certain and efficacious ones are within our reach?

But those who do not allow it to be useful in the first stage, maintain its efficacy in the second, when the inflammatory symptoms have abated, at which period it is supposed that its stimulating properties will keep up the action of debilitated vessels, and prevent the formation of schiirus—this idea is specious, and deserves attention, inasmuch as it is an acknowledgment of the stimulating properties of mercury; but it seems to be forgotten that the inflammatory action, though in a less degree, still subsists, which mercury and all other stimulants must necessarily aggravate—on the supposition, however, that all inflammatory action had ceased, and that the vessels were merely relaxed, why, in this particular instance, apply to mercury as a tonic, and not in a similar condition of the vessels of the lungs, kidneys, or other organ, arising from

from a similar cause?—the same reasons for the approval or rejection of the practice, must hold equally good in all;—but, as the stimulus of mercury might cause a return of inflammation, and as it does not possess any tonic powers, it has been wisely rejected in the latter diseases—why not also in that under consideration? It would be difficult to give a satisfactory reason for such a diversity of treatment, where circumstances are similar;—it is easy, however, to see the difficulty of getting rid of ancient prejudices and prepossessions.—Mercury has been long held as a specific in all liver and bilious complaints—it is a received opinion with the faculty and the public; here lies the delusion, and much time, I fear, will elapse, and much evil ensue, before the delusion come to a close.

Another objection, not less forcible, perhaps, than any yet adduced, may be here urged against the use of mercury; this objection arises from its secondary properties, which are debilitating, and must consequently diminish still further the action of debilitated vessels:—in order to explain my meaning, it is necessary to examine into the operation of the medicine—as soon as it begins to act on the constitution and as long as such action is kept up, the pulse is full and frequent, the face florid, the skin hot, the eye brisk and the countenance animated, the secretions and excretions are increased, the appetite and digestion improved, and a temporary but deceitful vigor is diffused throughout the

the frame—such are the primary or stimulating effects of mercury, the duration of which will depend on the constitution, on the dose and preparation of the medicine, and on the manner of its administration; much will also depend on the state of the atmosphere, and on present and former habits.—But after an uncertain period, we observe the converse of the symptoms just related, the pulse loses its strength, the eye its splendor and the countenance its animation, the face becomes pale, or is alternately pale and flushed, the appetite is impaired, the bowels are torpid or lax, the flesh wastes, and the powers of the mind become enfeebled—hence it appears, that mercury has a two-fold operation, stimulant in the first instance, sedative in the second, the strength afforded is temporary, the weakness produced of long continuance—it enlivens the circulation, while it empoisons the blood and invigorates the fibre, while dissolving its texture—in removing one disease it evolves many—in relieving slight affections of the alimentary canal or of the liver, it begets serious ones of the same organs. *—I do

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* Dr. Dick, a Gentleman of much practice in Calcutta, in a letter to Dr. Saunders, after bestowing a due share of praise on mercury in the early stage of hepatitis says, “in chronic cases, where there is no fever, but only an obtuse pain in the side and shoulder, with a fulness in the side, and about the pit of the stomach, keeping up a constant uneasiness, mercury seems to me to have but little good effects: when used freely it removes the symptoms at the time, but they generally return as soon as the mercury is left off. Having been repeatedly baffled in this way, and observing very often that *such Liver attacks succeeded long courses of mercury*, undergone for the cure of venereal complaints; I have, for several years past, trusted to a seton or issue made in the side, and with success far beyond my expectations.”

not wish, however, to be understood to say, that every person who has used mercury has suffered from its consequences; no doubt, many escape uninjured, thanks to a sound constitution and to the judicious administration of the medicine—what I mean to observe is, that injurious effects occur in the majority of cases in a greater or less degree, and will appear earlier or later in life, according to the constitution and mode of living—I would likewise observe, that though many be not visibly injured, yet such an alteration takes place in their constitutions by the influence of the remedy, that they too often become the parents of a diseased or debilitated offspring.

I have already remarked that the operation of mercury is two-fold, stimulant and sedative; under both it is accompanied with a corresponding degree of fever, high and low, analogous to the hectic and not unfrequently converted into it—this fever excites irregular actions in one or more healthy organs, increases morbid actions already existing or evolves them in organs predisposed to disease—in the scrofulous habit it seems to produce its worst effects, and these effects appear under a singular and great diversity of form; for instance—in some, tubercles are excited in the lungs, liver, mezentery, &c. —in others, the eyes are affected and the lens is obscured—in others, the fauces are ulcerated and the uvula is lost—one person is seized with an affection of the head,
another

another, of the prostate gland or bladder, another, of the stomach, intestines, spleen or pancreas; females are liable, moreover, to deranged actions of the uterine system—but these are not the only diseases evolved by mercury; to the above list we may add mania, gout, epilepsy, and if the constitution be free from all hereditary taint, rheumatic, nervous and various anomalous symptoms are produced, or diarrhœa, cynanche tonsillaris, chorea, or the mercurial disease, so accurately described by the ingenious Sir George Alley.

It would be difficult to assign a satisfactory reason, why different persons of the scrofulous diathesis are thus differently affected—I shall only observe that in most instances, the weakest part is that which first and principally suffers, and much of the difference will, perhaps, be found to depend on the degree of predisposition and on particular habits of living.

Having endeavoured to shew that mercury is no specific for hepatitis, and having next taken a view of its operation and effects, it now becomes necessary, for obvious reasons, to examine whether the opinion of Dr. Saunders respecting the disease be well-founded—he says there is something peculiar in the Indian hepatitis, that it is not simply a disease of a tropical climate, and he applies to it the epithet specific—the term thus employed implies a disease characterised

characterised by certain symptoms and stages, induced by particular causes and to be cured by particular remedies,—let it now be asked, is the hepatitis of the East-Indies, as contra-distinguished from the hepatitis of the West-Indies or of other countries, marked by such peculiarities? The question is readily answered, if we only bear in mind that the frame and organization of man is still the same, whether residing in the torrid, the temperate or the frigid zone; and that the causes and phenomena are likewise the same, making allowance for the influence of climate, peculiarities of constitution, local situation, &c.—within the tropics, for example, the symptoms are generally more violent and the tendency to suppuration consequently more rapid than in more temperate latitudes; but we find the same pains, fever, state of pulse, hiccup, &c. &c.—further, the phenomena accompanying the termination of the disease are the same, cessation of pain and fever in the case of resolution, shiverings and hectic sweats in that of suppuration;—the conclusion is obvious, the disease is the same, modified by the circumstances mentioned, whether occurring on the banks of the Ganges, the Shannon, the Wolga, or the Nile.—Mr. Clarke, a gentleman of observation and of indefatigable industry in the pursuit of the knowledge of morbid anatomy, says “amongst these eighteen dissections, I met with two as complete cases of diseased Liver as ever I saw in the East-Indies”—at that time he was quartered in Limerick—indeed, how-

soever Authors may differ as to the nature and treatment of hepatitis, little diversity of opinion will be found to exist as to its symptoms or causes—in the hepatitis to the East, the tendency to suppuration is, at times, great, but not more so than in the hepatitis of the West-Indies, nor is this tendency confined to hepatitis alone, it prevails equally in inflammation of other organs, whether of the brain, the liver, the lungs or the intestines; and the reason why the liver is more affected than any other viscus may, perhaps, be explained in the following manner:

Heat is a powerful agent in stimulating the sanguiferous system—in warm climates this cause operates without intermission, and predisposes the body to inflammatory disorders—the liver is larger and more abundantly supplied with blood-vessels than any other secretory organ, hence the increased action of its vessels and the consequent increased secretion of bile; in those of temperate habits this increased secretion is equal to counteract the effects of the cause applied, but violent exercise, intemperance and such like causes, co-operating with an overheated atmosphere, stimulate the vessels of the liver to such a degree as to destroy their secreting powers; or the fluid secreted is no longer proportionate to the increase of excitement, the consequence is, inflammation—from this short digression I revert to a consideration of the arguments of Dr. Saunders, who says “the inflammatory diathesis is marked
“ by a less intensity of symptoms in the Indian disease
“ than

“ than in this country, though the subsequent process
 “ towards suppuration is rapid.” We can readily conceive
 that if the parenchymatous substance of the liver be inflamed, the disorder is not so strongly marked as in the affection of its membranes; and it is possible that suppuration may take place without being preceded by acute local pain, but never without a general dérangement of the whole frame—the inflammation or suppuration of a tubercle not the size of a pea, in the parenchymatous substance of the lungs or liver excites pain or a sense of weight and uneasiness in the part, with fever and disturbance of the general habit—is it possible therefore to suppose, that a considerable portion of the same substance of either organ is capable of running a similar course without being accompanied by still more urgent symptoms?

But, laying aside all reasoning on this subject, it will appear from the history of the disease, and from the most respectable authorities, that hepatitis often comes on instantaneously and is attended with most violent symptoms—soldiers on a march or in garrison, are one minute in perfect health, the minute afterwards they writhe with pain—Dr. Duncan in his letter to Dr. Saunders says, “the urgency of this disease admitted of no delay.”—And one of the reasons alleged by Dr. Curry for not exciting a mercurial action in hepatitis, is the violence and rapidity of the disorder; and these and similar terms expressive of its danger and vehemence are employed
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by Christie, Clark, Paisley and even by Dr. Saunders, when treating of this complaint.—In support of the peculiar nature of the Indian hepatitis, Dr. S. asserts that the phlogistic symptoms are less violent and less liable to extend over the cavity of the abdomen, owing to the constitutional irritation being much milder—the history of the complaint shews it to be more violent in every stage in India than in this country, and from its more frequent combination with diseases of the stomach and bowels we may reasonably infer that its tendency to extend is also greater.—In another place Dr. S. remarks its tendency to assume the appearance of other diseases which in this country are usually unconnected with hepatic affection, and by way of illustration says “there is hardly such a disease known in India as simple diarrhœa, simple remittent fever and the like, the liver is the primary seat of the disease, and hence they neither yield to Bark, Opium or Astringents”—the same observation will apply to the hepatic affections of this kingdom, which are found by experience to be the cause of, and to be confounded with, the diseases just mentioned—the liver cough occasionally occurs in the Indian hepatitis and is cited in favour of its specific nature, but this is merely a secondary or accidental symptom, no way essential to the disease—the same happens in other inter-tropical countries and often in this, and depends on sympathy, and the
extension

extension of the inflammatory action, from the convex side of the liver to the diaphragm and lungs.

That it is not endemic to the European constitution is manifest from the known and acknowledged fact that the French and other Europeans whose habits of living are naturally temperate, and such of our own countrymen as adopt the same temperate habits, are rarely attacked—it would appear, moreover, from the *abstracts* of Clarke, Paisley, &c. that fever and flux, and not hepatitis, are the diseases to which the Europeans are mostly subject, as the former are to the latter, as *ten to one*.

It will not here be considered irrelevant to remark, that the epithet *specific* is applied by physicians to diseases of more than ordinary violence or which are but imperfectly understood, and from the power of association immediate recourse is had to mercury, because it happens to cure the venereal disease which no other medicine will cure—thus the yellow fever of the West Indies and of America has been considered a specific disease as well as the hepatitis of the East, and the supposition has led to the same unlimited administration of mercury; the treatment, moreover, is supported by Beane, Wright, Milne, Clarke, Chisholm, &c.—Names of not less weight and respectability, than Paisley, Duncan, Curtis, Clarke, Saunders, Curry, &c.—advocates for the same system in hepatitis and other hepatic affections—in despite, however, of the theory and practice of those

those learned Authors, the yellow fever has continued to make its usual ravages—the consequence has been, the disbelief of the doctrine and the discontinuance of the remedy—a like fate seems to await the indiscriminate use of mercury in hepatitis and other liver complaints, an event ardently to be hoped for, and which I anticipate with not less pleasure than solicitude.

In further proof of the specific nature of the Indian hepatitis, Dr. S. remarks that it does not occur so frequently in the West-Indies under the same parallel of latitude—that such, however, is the case, where all circumstances are equal, is a matter not yet established—in some Islands of the West-Indies and at certain periods, fever of so malignant a type often prevails as to occasion death in a few days or even hours—the presence of such a formidable disease supersedes all others.—But we cannot thence infer that hepatitis is not as prevalent in the West as in the East-Indies—as well might we say that it does not occur so frequently in the East, because, in Bengal, Bombay, &c. during the rainy season, it is not hepatitis that prevails, but fever of a most violent nature, or, bilious and putrid fluxes; whereas, at the same period and under the same parallel of latitude in the West-Indies, hepatitis and other liver complaints will be found to be the most general, provided only such quarter be for the time free from any epidemic.

Mr. Clark considers that the greater frequency of hepatitis in India may be accounted for, in some measure, from the vicissitudes of the weather being more sudden and frequent in that country than in the W.-Indies. Dr. Lind remarks that the land-winds blow at Madras, and other places on the coast of Coromandel, in the months of April and May, that they are of a hot suffocating quality, and their effect on the human body is to shut every pore of the skin, and entirely to stop perspiration. The same winds do not prevail in the West-Indies, and may, therefore, be reckoned as another source of difference.

But, there are other causes which operate still more powerfully in producing some diversity in the diseases of hot climates, or in modifying their symptoms, and which, independently of heat, are never to be overlooked—I mean such as arise from the nature of the soil, and its state of cultivation, from the presence or absence of marshes and putrid waters, the general face of the country, and the healthy or unhealthy situation fixed on for a settlement—these circumstances materially affect the condition of the atmosphere, and consequently the health of man, and by their operation alone can we satisfactorily account for the difference of disease and the different degrees of health in Bengal, Madras, Bombay and Bencoolen, and in the other European establishments in that quarter.—The same causes will, likewise, serve to explain why malignant
fever

fever prevails in some Islands of the West-Indies and in some parts of the same island more frequently than in others.

The last observation of Dr. Saunders deserves notice, “the exclusive efficacy of mercury in the liver complaints of India” he says, “may, perhaps, be explained by supposing that they arise from an indigenous or local poison or miasma, peculiar to that country, unlike any thing known under similar latitudes and temperatures, and for which mercury is as much an antidote as to the syphilitic poison.”

That mercury is no specific in hepatitis, has been, I should hope, sufficiently proved; as to the other hypothesis, it is novel and ingenious, respecting which I shall only remark—if the hepatitis of India originated in such obscure and invisible local poison or miasma, how comes it to be produced by evident and well-known causes? why are males, almost exclusively, the subjects of it?—why are the Europeans, who live abstemiously and are seasoned to the climate, and the natives (with the exception of the intemperate and the careless) generally exempted from it? and why should it make its appearance in all countries within the tropics, and even in temperate latitudes on the application of the usual exciting causes?

From the foregoing observations the following conclusions may be drawn :

1. The

1. The hepatitis of the East-Indies is neither a specific disease, nor the endemic of the Indian Continent, nor is it endemic to the European constitution.

2. The hepatitis of the East-Indies is the same complaint with the hepatitis of the West-Indies, and of other countries within the tropics, and differs from the hepatitis of these kingdoms only in degree.

3. Mercury does not act as a specific in the hepatitis of the East or West-Indies, or of any other country.

SCROFULO-SCHIRRUS;

OR,

CONSUMPTION OF THE LIVER.

INDURATION of the Liver, whether it be preternaturally enlarged or diminished in bulk, or whether its structure remain entire or become altered and disorganized, is commonly designed by the appellation of schirrus—this term seems too vague, and may produce practical errors of great magnitude, inasmuch as it confounds the different species and varieties of induration, and the peculiarities of treatment adapted to the cure of each—in every case of genuine schirrus I consider the liver to be disorganized; that a small or large portion of its substance loses its natural functions and properties, becomes impermeable and a cure impracticable.

Schirrus of the liver may arise from various causes and may exist in various degrees:—One species of this complaint I shall now particularly treat of on account of the frequency of its occurrence, and because the usual mode of treating it by mercury seems to be peculiarly prejudicial

dicial—it depends on that vitiated state of habit called scrofulous, and as in its causes and phenomena it is analogous to a similar condition of the lungs, originating in the same habit, it may, with propriety, be denominated—scrofulo-schirrus, or consumption of the liver.

In order to give the reader as clear an account of this complaint as I have been able to collect, I shall divide it into two stages, the incipient and confirmed; the former is characterised by an irregularity and diminution of appetite, by nausea, pyrosis, and a sense of distension and uneasiness of stomach—the bowels are constipated and flatulent, often griped, and their contents are of a greyish, clayey or darkish morbid appearance, or like to the grounds of coffee or chocolate—the urine is mostly deficient in quantity, at times abundant—it may be clear, muddy, of a straw colour without sediment, purplish or reddish, shewing a deposit similar to the lees of porter. The tongue is white or cream-coloured—the taste is vitiated, sweetish, bitterish, brassy or unctuous; eructations are frequent and disagreeable, they at times give out a smell likened to that of rotten eggs, and often give a fetor to the breath—a sense of weight and oppression, or of dilaceration or pain, is felt in the right hypochondre, occasionally extending towards the left, and to the umbilical region—this uneasiness or pain is sometimes aggravated by raising the right arm or moving the right leg, and is diminished
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by lying upon the back, somewhat inclined towards the right side, which seems to be the posture that affords most relief.—As the disease advances the vital and animal functions are equally disturbed with the natural, a low fever of an intermittent or remittent type sets in, accompanied by head-ach, by partial or general sweats, or by flushings of the face, præcordial anxiety, and loss of flesh and strength—the intellect becomes clouded, stupor and drowsiness come on, and the mind is alternately elevated and depressed—these symptoms are attended or followed by cough with mucous or morbid expectoration, dyspnœa and palpitation. Indolence begets ennui, yet fatigue and debility succeed to slight exertion—the frame of body somewhat alters, it is bent forward, the shoulders are elevated, and the capacity of the thorax is diminished whilst that of the abdomen is increased—the complexion changes from the sickly sallow to the dusky red, or to a yellow, mahogany or leaden colour—the skin becomes constricted and irritable; in one patient a puffiness of the integuments suddenly came on, and as suddenly disappeared; this puffiness gave a swollen bloated appearance to the face, hands and body, was attended with general uneasiness, and was generally preceded by oppression and considerable flatulence of stomach and intestines, on the expulsion of which it immediately subsided—the features lose their expression, the muscles their power of action, and both are alike indicative of
languor

languor of body and torpidity of intellect;—as the disease advances the appetite becomes fastidious; at times there is a great desire for animal food, but generally speaking, diet of every kind is loathed, yet the body suffers if the stomach be empty;—the secretions of the abdominal viscera are vitiated, chylification is defective, the system loses its due supply of healthy, and is scantily supplied with morbid chyle, purplish spots of the size of a pea occasionally appear upon the lower extremities, vertigo and head-ach come on with a sense of sinking and frequent sighing, shooting pains are felt in both hypochondres, in the umbilical region and in the back, loins, shoulders, wrists and ankles; and hemorrhagies, not unfrequently take place, from the nose, gums, stomach, bowels or liver,—confirmed hectic now sets in—or, the lymphatic system is deranged, and dropsy follows; in either case death supervenes—and as in scrofulo-pulmonary consumption the patient is, at times, unexpectedly carried off by the rupture of a blood-vessel or abscess in the lungs, so in the scrofulo-hepatic consumption the same event may occur by the rupture of a blood-vessel or abscess in the liver.

Such is the history of the scrofulo-schirrous or consumptive liver, which, it must be acknowledged, is still imperfect; indeed, in its early stage it is difficult, if not impossible, to state any single diagnostic symptom by which

which it can be distinguished, or to comprise in a few words, the wide range and mutable character of this Protean disorder. I should hope, however, that when all the symptoms are taken into consideration with that particular habit in which it commonly occurs, the intelligent practitioner will, in general, be enabled to discover its existence; at the same time we may observe, that it is not unfrequently obscure in its nature, that it puts on the appearance of, and is mistaken for, other diseases, and that after having been, for years, the cause of uneasiness and distress, it will be detected at a period when every effort to diminish its violence, or to stop its progress, will prove unavailing.

Scrofulo-schirrus of the liver is often an acquired, oftener an hereditary, disease—like others originating in scrofula, it may long lie dormant from the absence of its several predisposing and exciting causes—it may be evolved by whatever induces an irregular action of the vessels of the liver in particular, or exhausts and impairs the body in general, as hepatitis, excessive heat, the depressing or more violent passions, fevers, intemperance in drinking, long - fasting, night watching, intense study, &c.—and it may be produced, more especially during the period of infancy and childhood, by a scanty or unwholesome diet, by impure air, want of cleanliness and exercise, and by all those causes which impair digestion,
vitate

vitate the circulation, and which, consequently, excite morbid actions of the sanguiferous and lymphatic systems.

This complaint is observable in every temperament, perhaps chiefly in the sanguineo-phlegmatic and the melancholic :—It attacks those of a slender rather than of a robust make ; the muscle is flaccid, the skin soft, the hair and eyes are occasionally dark, oftener of a light colour, the tunica adnata is of a dull white, tinged with yellow, and the complexion is pale or sallow—the face appears as if besmeared with grease, the eyes are tender, and the edges of the eye-lids apt to inflame and ulcerate on exposure to cold air, intense heat, light, &c.—the upper lip is often swelled and thickened, the body is irritable, is readily chilled and as readily overheated ; alert and active, it is little able to undergo fatigue or to make any considerable exertion—the feet and hands are subject to chilblains, and the extremities of the fingers are frequently truncated.

The mind participates somewhat of the state of body now described ;—it is irritated, depressed or exhilarated by slight causes, is affected by sudden vicissitudes of the weather, is frequently overcast by a temporary gloom, and seems to be rather marked by quickness of apprehension than depth of understanding.

I have observed that this complaint is hereditary ; to this subject my attention was first directed by repeated
exami-

examinations of the enlarged and tense abdomen of children, in numerous instances of which, a tumefaction or hardness of the liver, or both, may be detected by the touch.—This state of the liver and abdomen is accompanied by a preternatural appearance of the fœces and urine, by a pale or sallow complexion, mostly by a low irregular fever, by cough, dyspnœa, and, at times, by jaundice.—The majority of these little patients bear marks of scrofula in their squalid countenances, and in the appearance of their eyes, hair and general habit—they are subject to colicky pains, to convulsions, and to herpetic eruption, to affections of the eyes, to rickets, to hydrocephalus internus, and to swellings of the cervical glands; and when farther advanced in years to pulmonary, hepatic, or other organic consumption:—amongst the children so affected, many had had diseased and many healthy nurses—some had been spoon-fed, others half-fed, but all had been neglected or mal-treated.

From a consideration of the state of the child, my attention was subsequently directed to that of the parent—here, an ample field for investigation was opened, and this served, in many instances, to elucidate appearances previously involved in obscurity.

I found that sometimes one, and sometimes both the parents of these children, were of the scrofulous habit,
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and when young had been affected with one or more of the complaints last mentioned;—that some had become subject to catarrh, to cynanche tonsillaris or to asthma; some to irregular actions of the stomach, bowels or urinary organs; that many were labouring under scrofulo-schirrous liver, or pulmonary consumption—and that several had fallen victims to these diseases—tracing this inquiry a generation back, I discovered, that some of the ancestors of these parents had been attacked with similar disorders, and had been carried off in a similar manner—such was the result of this investigation; from a review of which, and of every circumstance connected with the subject, it would appear, that the enlargement or hardness of the liver, and of the other abdominal viscera of children, is generally scrofulous; that it is an hereditary and may be an acquired disease, and that the schirrous liver of adults is, likewise, often of a scrofulous nature.

And here I may observe, that as on the one hand, scrofula of the liver, or of other organs or parts of the body, may be produced, even in the children of healthy parents; and once produced, may be entailed on succeeding generations; so, on the other hand, it may be a consolation to those suffering from scrofulo-schirrous liver to reflect, that this disease may, not only, not extend itself to the whole, but not even to any one of their offspring; if the complaints incidental to infants be in

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them, judiciously treated, if their digestive organs be kept in a healthy state, and if, through life, all those means be employed which tend to invigorate the fibre and give energy to the nerve.

Scrofulo-schirrous liver is, perhaps, with the exception of pulmonary consumption, the disease to which the inhabitants of this kingdom are most subject—it attacks the very young, the middle aged, and those far advanced in years;—it is usually slow in its progress, and is often mistaken for disorders of the lungs—both lobes are commonly affected, the right generally in the first instance, in a greater degree than the left; but as the complaint advances, the left lobe from its enlargement and hardness seems to partake more considerably of the diseased action—females are rather more subject to this complaint than males, but it appears to differ somewhat in its progress in the different sexes—in the female, it is usually obscure and slow in its course, and often assumes the appearance of other diseases—the liver is frequently diminished in bulk and weight, and the patient commonly dies hectic—whereas, in the male, the symptoms are more prominent and rapid, the liver is generally enlarged, and the complaint is more frequently accompanied by dropsy.

There are various degrees of the scrofulo-schirrous or consumptive liver—under any degree of it, some apprehension is to be entertained for the future safety of the patient;

patient ; if it be confirmed, a cure is rather to be wished for than expected—the probability of affording permanent relief, or of checking its progress, will depend on the stage to which it has advanced, on the age, constitution and habits of the patient, and on the causes by which it was produced.

This complaint occurs chiefly as an hereditary affection. It appears that a small or large portion of the liver, in those born of scrofulous parents, may be imperfectly evolved or deficient in vitality—such portion is particularly liable to morbid or irregular actions from trifling causes ; hence, an irregular or vitiated secretion of bile—after an uncertain period, if these morbid actions continue, or be aggravated, disorganization takes place, or a death of the part succeeds ; when blood-vessels and fibres, nerves and lymphatics are obliterated and destroyed—the diseased portion becomes tuberculous, soft or hard, knotted and impermeable, and a cure impracticable—to renovate or re-organize such portion, all endeavours must prove fruitless ; even the herculean powers of mercury cannot here avail—is it within the province of medicine to re-organize the dead !

Dissection presents to the view an irregularly disorganized mass, interspersed with tubercles or small abscesses ; and, at times, with fatty and curd-like substances, differing in size, colour and consistence—some vessels are obliterated, some enlarged, and some diminished in diameter—at one
time

time the liver is considerably enlarged, at another, diminished in bulk—one portion is softer and paler, another harder and darker than natural—but the whole exhibits to the eye a confused, misshapen mass, unlike to any thing organic, unfit to fulfil any function, and incapable of being acted on by any remedy.

In the early stages of this complaint much may be accomplished by a fit regimen, and by a full and judicious administration of our remedies; but a length of time must elapse before the disease can be checked, or the health re-established.

Whatever tends to strengthen the frame and to preserve a healthy action of the surface, will prove serviceable—the various means of accomplishing these objects I shall now enumerate;—In the majority of cases, a regular supply of animal food constitutes a principal branch of the treatment—it should be given in small quantity twice or thrice daily—the kind must depend, in some measure, on the palate and stomach of the patient; generally speaking, butcher's meat, simply dressed and tender, is preferable to every other—if this should not agree, poultry, or white and shell-fish may be taken, or rabbits or wild-fowl—the gravy of meat is nutritious, and in some instances, extremely useful—puddings of various kinds, as rice, bread and custard, may be given; or, blanch-manger or arrow-root—asses milk is beneficial—cow's milk, warmed and mixed with soda-water, is a drink equally
grateful

grateful and salutary—vegetables may be used in small quantity—they should be well boiled, and such only should be chosen as are least apt to produce flatulence of the stomach and intestines.

All food, difficult of digestion, is injurious;—such are dried, baked or highly seasoned meats, toasted cheese, melted butter, ~~red~~ or dried fish, pastry, salads, soups, and tea and coffee.

Of the various table drinks, pure water is entitled to a preference, as it is best calculated to promote digestion;—the seltzer or soda-water is sometimes taken with advantage, in cases of acidity, or in spasmodic affections of the stomach.

The more pure, light and generous the wine, the more healthful—Claret, Port or Hock, Teneriffe, Madeira or Bucellas may be taken in moderate quantity—malt liquors and domestic wines are grateful to the palate, and improve the appetite of some patients; cider and perry, of others; and where foreign wines are not to be had, or are found to disagree, these liquors, or spirituous ones, largely diluted, are allowable.

The warm sea-bath is deserving of particular notice—it acts as a restorative and determines to the surface—the temperature of the water should be about 96°. Fahrenheit, and the period for remaining in it, from 15 to 40 minutes—this may be employed every second or third day—as soon as the patient acquires strength sufficient to bear the shock of the cold or shower-bath, they promise to be beneficial.

Gentle

Gentle exercise on horseback excites the vessels of the liver, and of every other viscus, and contributes, in an eminent degree, to the relief of the complaint, and to the restoration of general health—warm clothing, a mild air, early hours and the use of the flesh-brush, are highly efficacious—a cold and moist, or a warm and moist atmosphere, is to be avoided, for they depress, in a remarkable degree, every function and principle of life.

If the disease be far advanced, and hectic fever be present, a sea voyage and a more genial climate may prove salutary—but, if circumstances exist which forbid the removal of the patient, an artificial climate may be formed during our rigorous season; and the many disadvantages of a foreign residence will be thus avoided;—spacious well-ventilated apartments, in which a mild and equable temperature is preserved, may answer every purpose; and all the comforts and conveniencies of a home, and a family, may, at the same time, be enjoyed.—The mind is to be gently excited by light studies and agreeable recreations; for, as anxiety and intense thought depress the nervous system, and debilitate the frame; so, the beauties of literature, the charms of music, and the joys of society, delighting the imagination and pleasing our feelings, enliven the circulation and invigorate the body.

The remedies to be employed internally are, peruvian bark, chalybeates, sulphuric acid, crystals of tartar and some mineral

mineral waters—these assist the appetite and digestion, and give tone and energy to the system—their application to particular ages and constitutions must be left to the judgment of the practitioner—the occasional use of cathartics is essentially necessary to keep up the action of the intestines.

The Bark may be given in powder, decoction or infusion, singly or combined—when taken in substance, it produces its best effects; but cases occur, where it runs off by the bowels, unless taken in a liquid state, or shortly after a light meal—in these cases, the most useful and palatable form, in which it can be administered, is that of simple infusion;—it may be triturated with magnesia and infused in cold distilled water—or, it may be infused in lime-water, and thus prepared, it is suited to particular conditions of the stomach.

Of the various chalybeates, the muriated and acetated tinctures of iron seem to be most efficacious—the former is the more active; it should be given in small doses, largely diluted with water, and must be taken for a considerable time in order to produce any good effect—in many instances, the powers of this medicine are increased by dilution with tepid water—a pleasurable sensation is thus excited in the stomach, and a glow of heat diffused over the surface—the acetated tincture may be given in any convenient vehicle, perhaps, there is none preferable to asses milk or runnet-whey.—The sulphuric acid may be mixed with the bark infusion, or be taken in water.

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The purgative is to be adapted to the constitution—rhubarb, ipecacuanha and ginger, agree with some—aloe, capsicum and soap, or the cathartic extract, with others; whilst a few require the warmer tinctures, or the cooling salts.

The native springs of this kingdom, which I have observed to be serviceable, are, the chalybeate and sulphureous—of the former I shall mention Ballyspallen and Castleconnel—of the latter Spas, Swadlinbar, Lucan and the Golden Bridge—this last has been lately discovered in the vicinity of Dublin, and seems entitled to our consideration—it acts as a gentle diuretic in most cases; it likewise promotes appetite and digestion, and corrects various anomalous morbid actions of the stomach, bowels and biliary organ.

The local treatment consists in the use of fomentations, in the application of leeches and blisters, and of stimulating liniments and aromatic plasters—in simple friction, and in the insertion of setons or issues—the proper time to have recourse to one or more of these remedies, must be determined by the discernment of the physician.

I have not here made mention of the bitters and alkalis, usually administered, to supply that deficiency of bile, so uniformly a consequence of the disease—that these remedies may be usefully exhibited in moderate doses, and in certain states of the stomach
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and liver, I grant ; but their present injudicious and indiscriminate use weakens the tone of the stomach, and alters the properties of the gastric juice ;—and when the changes they must undergo, before they reach the intestines, are considered, and contrasted with the natural changes produced by a mixture of the bile with the aliment, the difference will appear to be such, as often to place in a questionable shape, the propriety of their exhibition.

I have now delivered my sentiments on the plan of treatment, which appears to me best calculated for the relief of the scrofulo-schirrous or consumptive liver.—I have already stated, that it is the most common complaint of this viscus, and one which is very frequently met with in this kingdom ; I may likewise observe, that it is one, for the cure of which mercury is constantly administered ; if the view, however, which I have taken of it be correct, it must appear that mercury will not be merely inefficient, but injurious ; because, so far from curing scrofula under any shape, it aggravates its symptoms when existing, or calls it into action when it might otherwise have lain dormant.

In the following Cases I have particularly attended to the constitution of the patients, and of their families ; from a consideration of which, and from the nature of the symptoms, I conclude that they properly come under the denomination of the scrofulo-schirrous or consumptive

liver—these cases may, moreover, enable us to form just notions on the present subject, and to explain some peculiarities of its nature.

CASE.—Mr. C. aged 46, of a melancholic temperament, with dark hair and eyes, was, for many years, subject to slight fugitive pains throughout the abdomen, and to the various symptoms that attend an imperfect state of the digestive organs—he twice laboured under jaundice, and was twice salivated—temporary relief was obtained; but about six months subsequent to each course of mercury, the disease increased—on examination, both lobes of the liver were found diminished in bulk and somewhat indurated—latterly, he made trial of the steel and tonic plan of treatment, and with some benefit.—This Gentleman has had six children—3 boys, 3 girls;—one of the girls died of hydrocephalus internus—another has several sores in her right foot, and the third is subject to erysipelas of the face and to herpetic eruptions;—one of the boys has lost the sight of his left eye from an opacity of the crystalline lens—a second is asthmatic—the third, in appearance, is healthy.—The mother of these children is of a hale constitution—their grandfather died of asthma—the state of the children of this patient confirmed me in the idea that his liver-complaint was scrofulous, and that the use of mercury had been injudicious.

May, 1808.—Mr. W. aged 36, of a scrofulous habit, complained, for six years, of cough and dyspnoea, attended

attended by hæmoptysis, and by gross, heavy expectoration—the treatment had been solely directed to the relief of the chest, without affording benefit—the complexion was sallow, and the appetite and bowels were considerably disturbed—on examination, the left lobe of the liver was found enlarged and hardened—on this discovery, a more nutritious diet was allowed and exercise on horseback recommended; the acetated tincture of iron was given in asses milk, and the sulphat of magnesia taken as a purgative—the complexion became clearer—the pectoral symptoms were relieved, and some amendment took place in the general health.

Here, the lungs were but secondarily, though seriously affected—the complaint, in the first instance was scrofuloschirrus of the left lobe of the liver,

This Gentleman had four children—one was subject to attacks of colic—a second to slight inflammation of the eyes—his father died of liver-apoplexy.

CASE. March, 1809.—I visited a Gentleman, aged 63, of a sanguine temperament and scrofulous habit, who had had, each spring, for fifteen years, a slight or violent attack of bilious colic, for the cure of which he had taken purgatives and diluents—about four months before I saw him, an unusual fulness and hardness of the right lobe of the liver were detected by the touch—a slight pain was felt

felt in the right shoulder, and he complained of cough and dyspnæa—to remove these affections he was fully mercurialised—the consequence was, a more troublesome cough, more laborious respiration and a loss of strength—but no change in the liver-complaint—he then made use of purgatives, of the Iceland-moss, and of the muriated tincture of iron, and with manifest advantage—his diet was light and nutritious.

No cause could be assigned for the presence of these complaints;—he had two children grown up, apparently healthy—two were carried off in their infancy by dropsy of the brain.—The father of this patient died of asthma and hydrothorax.

CASE. In April, 1808, I was in attendance on a young lady of a strumous habit, who had been hectic for better than two years; in whom, the prominent symptoms were, cough, dyspnæa, and, occasionally, hæmoptysis—the digestive and uterine functions were impaired, and she was much debilitated—she had, for about a month before, felt acute pain in her right side, and a swelling had begun to shew itself posteriorly, below the false ribs, when, the cough and difficulty of breathing abated;—on the ground of the complaint being hepatic, mercury was administered and salivation produced—during the continuance of the mercurial fever, the pains of the side

side were, at times, more acute, though she thought her general health improved—about a month afterwards dropsy followed, death closed the scene.—Was the pulmonary, in this instance, the consequence of the hepatic affection?—or were they co-existent?—Was not this a case of scrofulo-schirrous liver?—Did not the mercurial action hurry on the dropsical symptoms and cause a premature death?—the mother of this patient died of a liver-complaint and dropsy, and one of her sisters is ill of *catarrhus vesicæ*.

CASE.—Some months ago I saw a Gentleman who had been confined to bed for a fortnight—he complained of shooting pains in his wrists, shoulders and ankles, in both hypochondres and in the umbilical region—on examination, both lobes of the liver seemed to be somewhat hardened and diminished in bulk—he was fretful and anxious, sighed frequently, made deep inspirations and sudden expirations—had palpitations and weaknesses, partial clammy perspirations of the head and chest, flushings of the face, and an uneasy heat in the palms of the hands and soles of the feet—the bowels were irritable and the pulse was irregular and intermitting—in this state he continued four days; a few minutes before he breathed his last, the abdomen swelled to an unusual size—diluent and purgatives had been recommended—the *fæces* were blackish, brownish, tinged with blood and
mucus.

mucus.—This Gentleman had been for years, what is called, bilious—was scrofulous, of a delicate form and sallow complexion—about three years before, he was seized with violent pains in the right hypochondriac and in the umbilical region, which terminated by a copious discharge from the bowels, of a matter resembling the grounds of coffee.

This case presents some of the symptoms of the last stage of scrofulo-schirrous, or consumptive liver.—Was the sudden death owing to the rupture of an abscess or blood-vessel of the liver?—This Gentleman has left four children—two scrofulous—two apparently of sound constitution—his father died of a disease of the bowels—his mother, of pulmonary consumption.

CASE.—Mrs. B. aged 24, of a delicate constitution, had complained for months, of fugitive pains in the right hypochondre, and throughout the abdomen—which latterly had become more frequent and violent—the inferior anterior portion of the right lobe was hardened and diminished in size—the bowels were sluggish and their contents morbid—a low fever existed, and a pain of head and eye-balls, was a distressing and almost constant symptom—the taste was vitiated, brassy or bitterish, and the general health was much reduced.

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The symptoms here, seemed to denote the progress of scrofulo-schirrus of the liver, towards the second stage—it was happily checked by the use of purgatives, steel, the tepid bath and the restorative regimen.—This Lady has one child subject to attacks of head-ach;—her father died of liver-apoplexy.

CASE.—W. M. aged 28, a printer, of a melancholic temperament, sallow complexion and scrofulous habit, had complained, for five years, of slight fugitive pains in the region of the great lobe of the liver, occasionally extending through the left—the bowels were irregular and the fæces and urine preternatural—he was weak and emaciated, had little appetite, and was subject to low fever and to partial perspirations of the head and breast—this man had been twice mercurialised—whilst under the influence of mercury he thought himself easier; shortly afterwards, there was an aggravation of the symptoms, and debility and emaciation followed.

During two months he made trial of the warm bath, the muriated tincture of iron, purgatives and the sulphureous spa—the aromatic plaster was applied upon the part affected and a generous diet recommended—his general health has amended and the local uneasiness is diminished.—This patient has two children, one ricketty and ill of ulceration of the eyes;

lids;—he has had two brothers and two sisters, both brothers died of pulmonary consumption, the sisters are healthy—his father died of dropsy, and was, what is commonly called, scorbutic—his mother had a hale constitution.

CASE.—In the autumn and winter of 1808, I visited a Lady about 50 years old, of a strumous constitution and delicate, irritable frame—she complained of being bilious, that is, of indigestion—in the early part of life she had enjoyed health, though it was customary with her to pass, from 3 to 8 days without having any evacuation by the bowel.—Both lobes of the liver were diminished in bulk, and knotted and hard as marble—bitters, mild purgatives and calomel were prescribed—next in consultation, mercurial frictions, the tepid bath and taraxacum—then, the various preparations of steel and crystals of tartar—and mercury, after about a month's interval from its first exhibition, was again had recourse to—of these remedies, the most useful, were the crystals of tartar and the muriated tincture of iron—the most hurtful, the mercury—on taking the former, the appetite and health seemed to improve—to the latter, succeeded prostration of strength and ascites—the functions of life gave way—death closed the scene.

Here is an instance of the scrofulo-schirrous liver aggravated by the mercurial course—the mother of this lady

died

died consumptive ; and one of her children is now dying of pulmonary consumption.

Mr. D. aged 28, of a sallow complexion and scrofulous habit, had complained of hæmorrhoids for six years, accompanied by frequent pains and an irregular state of the bowels—the rectum was schirrous—he was feeble, emaciated and hectic—about three months before his death the left lobe of the liver was observed to be enlarged and hardened ; mercury was then administered, but with sensibly bad effects—he was sent to the country—diarrhæa came on—he died—in this instance, the scrofulo-schirrus of the liver supervened to, or, took its rise from, the scrofulous action that was going on in the rectum—what may be considered as singular, the appetite, in this instance, continued good until the disease had nearly exhausted the body.—The mother of this gentleman fell an early victim to pulmonary consumption—he has left one child of a pale complexion, and whose liver is enlarged.

Dec. 1808. CASE.—A Gentleman, aged 54, of a delicate scrofulous constitution, had been, for years, subject to pains and uneasiness in both hypochondres, occasionally stretching towards the right and left shoulder ; these symptoms were accompanied by a considerable derangement of the natural functions—during the last six months of his life, he laboured under permanent jaundice, and œdema of the feet and ankles—the *sterces* were darkish or greyish, the

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urine was sometimes of a red, sometimes of a coffee colour—fever existed in a low degree—to mercury a fair and full trial had been given—after the second course, the dropsical symptoms set in—the tonic plan of treatment was subsequently recommended, but medicine could be then of little avail; for, both lobes of the liver were disorganized, and every function of life was impaired.—This complaint appears to be scrofulo-schirrus of the liver in its second stage, which came on imperceptibly, and for which, no cause could be assigned, except anxiety of mind arising from losses in trade, and acting on a body predisposed to this disease.—This Gentleman had six children—two died of pulmonary consumption and one of dropsy of the brain—his father died of ascites—his mother was suddenly taken off by dysentery.

A. M.—A young Lady, aged 21, of a sallow complexion and strumous habit, has complained for several weeks of pain in the posterior portion of the great lobe of the liver—she is subject to flushing of the face, to head-ach and to a teasing cough—the appetite is irregular and fastidious—the bowels are constipated, and their contents preternatural—leeches have been applied upon the part affected—cathartics have been administered, and the air of the country has been tried, with manifest advantage.

The father of this lady is subject to cough and to bilious attacks—her mother is scrofulous and asthmatic—

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one of her aunts died of a schirrus of the rectum—another is now jaundiced.

In this case we are presented with some of the symptoms of the first stage of scrofulo-schirrus of the liver, and which, if neglected or mal-treated, will, at length, run into the second or confirmed stage.

About six months ago, I visited a child eight years old, ill of jaundice, and of enlarged liver and abdomen—the bowels were torpid, the fæces of a pale colour, the urine was of a deep red, and the tongue foul—there was little appetite and much thirst—purgatives and the tepid bath removed the disease.—The mother of this boy is scrofulous and has had jaundice arising from schirrus of the liver, for the cure of which mercury was administered she lately had a similar attack, which has been removed by the application of leeches, by the judicious use of purgatives, and by the warm bath; and to prevent a return, the tonic plan of treatment has been recommended.

The case of the child here related, points out not only the hereditary nature of the scrofulo-schirrous liver, but the simple means by which it may, in the first instance, be removed—had mercury been employed, the constitution would have been injured and dropsy might have followed, or, the complaint might have been confirmed.

BILIARY CALCULI.

Biliary Calculi are found in the *pori biliarii*, in the gall-bladder, and in the hepatic, cystic and common ducts—they produce jaundice and give rise to excruciating pain in the epigastric region, and to great derangement of the alimentary canal—the violence, obstinacy and recurrence of this complaint, depend on the size, number and form of the calculi—if they be so large, or so situated, as to impede the free passage of the bile into the duodenum, the liver is distended and pained, and jaundice follows—if the calculus be angular and of such bulk as to pass with difficulty from the common duct into the duodenum, an acute pain is felt in the region of the stomach or umbilicus, accompanied, sometimes, by inflammation of the part so affected.—A solvent for biliary calculi has been long sought after, but has not yet been found—the day of this discovery appears far distant—a particular regimen may, perhaps, obviate their formation; but, to go in quest of a medicine which will act on biliary calculi, when locked up in their ducts, is going in pursuit of an *ignis fatuus*—these calculi are so situated, that no medicine can come in contact with them; and when we reflect on the many changes the remedy must undergo, in the digestive, lacteal and sanguiferous processes, and its subsequent modification in the biliary system, before it can reach the seat of disease: it must appear evident, that its properties will be so changed.

changed, that it can then possess but little of its original solvent powers—it is, therefore, something worse than useless, to administer such medicines as can only act as solvents of these calculi when taken out of the body—mercury and the alkalis, alcohol and the turpentine have been repeatedly tried without effect—the three latter are now generally laid aside; yet, because the disease is accompanied with symptoms attendant on other diseases of the liver, practitioners are misled, and mercury is administered in a complaint, placed beyond the sphere of its operation.

But, laying aside this question, it is of moment to distinguish the pain, which arises in inflammation of the stomach and bowels, from that which proceeds from biliary calculi, and, to ascertain the mode of treatment, which, in doubtful cases, would be most advisable—in the pain attending biliary calculi, we are told that the pulse remains undisturbed; whilst, in that which accompanies inflammation, it is weak and frequent—and this observation does, sometimes, hold good; but, the pulse is a fallacious criterion, because it varies considerably in strength and frequency in each disease—and biliary calculi and enteritis are, moreover, frequently conjoined, owing to the stimulus and pressure of a hard, sharp-pointed body on a highly sensible and muscular canal—but, supposing the pulse to be but
little

little altered, if other symptoms indicate inflammation, and the patient be strong and plethoric, would it be prudent to neglect the employment of those means, which alone, in the one case, could save the life of the patient ; and from which, in the other, no evil was to be apprehended ?—the line of conduct to be observed on such occasions, must be directed by a consideration of previous symptoms, present appearances and probable consequences—if the pain have been attended by jaundice, and have continued for days in the region of the biliary ducts, with intervals of ease ; and if the appetite, strength and spirits, have been but little impaired, there is ground to hope that a formidable disease does not exist ; and these symptoms will form a striking contrast, with the feverish disposition, the dejected countenance, the despondent mind and the sudden prostration of strength which characterize enteritis.

Emetics and cathartics are remedies in common use for the cure of biliary calculi—emetics are given to rouse and stimulate the ducts to discharge their contents ; or, rather to force out the calculus, by a sudden concussion of the body, and by the pressure of the neighbouring muscles and abdominal viscera—the propriety of the practice will depend on the degree of pain, and on the occurrence of such other symptoms, as may denote the presence or absence of inflammation—the same remark will apply to cathar-

cathartics, making due allowance for their less stimulating properties.

In doubtful cases, it will be prudent, in the first instance, to make use of fomentations, or of the warm bath ; or, to resort to blood-letting, or to opiates mixed with cathartics, a combination, which, in affections of the alimentary canal or biliary ducts, accompanied by pain, spasm or constipation, is often productive of unexpected relief.

JAUNDICE.

A yellowness of the skin and tunica conjunctiva of the eye, and a preternatural state of the fœces and urine, constitute the complaint called Jaundice.—Are these symptoms to be considered as forming a distinct disease of the liver ?—are they not rather to be reckoned as accidental symptoms proceeding from various and opposite diseases ?—they occur in obstructions of the liver, in obstructions of the neighbouring viscera, in cholera, in fevers ; and they proceed, likewise, from the presence of calculi in the biliary ducts.

But, if it must be considered as a distinct disease, we should never lose sight of one point, that it is no primary complaint of the liver, but of its ducts ; and as much to be separated from the diseases of the liver as the diseases of the ureters are from those of the kidneys.—And this I wish
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particularly to dwell on, because, the mere jaundiced appearance of a patient, is too often considered as a sufficient cause for the exhibition of mercury; whereas it is evident that if the ducts be primarily concerned, this remedy cannot fail to be injurious; for it stimulates the vessels of the liver and increases the secretion of bile; hence, when obstruction takes place, the further distension of the ducts and liver, and the consequent aggravation of the symptoms—in fevers, also, it may be observed, that the liver is already too much excited, and that mercury must necessarily increase such excitement—and, in certain enlargements of the neighbouring viscera, giving rise to jaundice, it would but aggravate the morbid actions already existing.

WHAT IS THE NATURE OF THE COMPLAINT, NAMED BILIOUS?

No disease is more frequently spoken of by practitioners or complained of by the public than the Bilious; yet, its history is not related, nor its mode of cure established—no fixed idea is annexed to it, nor do the faculty seem agreed as to its nature or causes—numerous are the patients that complain of being bilious; it seldom happens, however, that any two relate the same symptoms; and though

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the disease be familiar, yet every thing with regard to it, is vague and unsatisfactory.

I shall endeavour to remove some of the difficulties which obscure this subject by a brief inquiry into its symptoms and pathology.—The liver generally retains its natural size—it may be somewhat enlarged, but is never altered in structure—the appetite is impaired and capricious—the bowels are torpid and their contents often pale, or otherwise morbid—the urine is scanty, and deposits a mucous or lateritious sediment, the skin is dry and constricted, there is vertigo, and the complexion is wan or sallow—the senses are blunted and vitiated, especially those of smell and taste; the mind is listless and dissatisfied, and there is a general languor and uneasiness, unaccompanied by any urgent symptom, or pain of any viscus.

Such are the symptoms which appear to characterize the complaint called, **Bilious**—they depend on a torpor of the vessels of the chylopoietic viscera, particularly of the liver; hence, a defective and vitiated secretion in these organs; the food no longer undergoes the changes necessary to its solution; and its conversion into healthy chyle is prevented.

From what has now been stated, it is obvious that the digestive organs are primarily concerned, and that the

food is not digested nor assimilated; the disease therefore would be more aptly denominated Indigestion, than Bilious; for, the term, Bilious, denotes a superabundance of bile, whereas from the history as now related, it appears evidently to be deficient.

This complaint occurs very frequently in the weak and phlegmatic of both sexes; and proceeds from all those causes which lower the tone and energy of the digestive organs; particularly, a sedentary life and anxiety of mind.

The indications of cure are manifest—they consist in exciting the vessels of the abdominal viscera and of the skin, to their wonted healthy actions—these objects may, in general, be accomplished by the judicious administration of purgatives, by a fit diet, by exercise on horseback, by early hours and strict temperance, by a cheerful society, and by the use of the flesh-brush, the tepid or cold bath, and of a chalybeate spaw.

Ipecacuanha, sometimes, proves eminently serviceable from its tendency to act on the vessels of the surface; the importance of supporting which, cannot be too strongly urged; for, such is the sympathy and connexion between the skin and the stomach and intestines, that, whatever increases the tone of the former, proportionably augments the energy of the latter; this is exemplified

plified in the effects of sea-bathing and of exercise in the open air; and in the advantages to be derived from the use of the flesh-brush.—And here, I may make mention of the shower-bath, which, not only in this complaint, but in most others, where baths are found to be beneficial, is deserving of attention—it is portable, simple in its construction, and easily erected in the chamber or anti-chamber of the sick—and, what is of considerable moment, the shock may be adjusted to the strength and feelings of the patient, by regulating the quality, quantity and temperature of the water,

It is now necessary to say a few words on the use of calomel, a remedy in common use for the cure of this complaint; and so universally employed in families, as to be considered as a domestic one—it is the supposed specific for bile, and such is the association that exists between the words bile and calomel, that, on the bare mention of bile, calomel is prescribed as its undoubted specific.

Such is the opinion of the day with respect to calomel; which, like many others, has been taken up on trust and acted on without inquiry—that instantaneous relief, often attends its exhibition, there is no doubt—it is generally

rally quick of operation ; it is tasteless, easily swallowed and retained ; and these are some of the chief reasons for its general administration ; moreover, from the immediate ease which is, at times, procured by this remedy, it is repeated as often as such ease is required—but, the relief obtained, does not always counterbalance the evil produced—its very effects, not unfrequently, give occasion to its repetition, for, symptoms arise which are mistaken for, or confounded with, the previous malady ; and, for the removal of which, it is again had recourse to.

The more immediate ill effects of calomel are, colic, gripes, tenesmus, diarrhæa, bloody stools, prolapsus-ani and convulsions ; more particularly in the puny offspring of enfeebled or diseased parents—its secondary operation is slow and obscure, and, therefore, more alarming, shewing itself in loss of appetite, in weakness and irregularity of the bowels, and in a general debility and irritability of the entire nervous and muscular systems—the complexion changes from a rosy to a pale or lemon-colour—the fibre becomes flaccid, a low, irregular fever makes its appearance, and the flesh and strength decay—such are the secondary effects of the long continued use of calomel—in some habits, they are accompanied by swellings of the mesenteric, cervical or axillary glands ; in others, with sore eyes, diseased teeth and gums, or with complaints of the spine, knee or hip-joint—and, as months or years generally elapse before the secondary diseases are developed,

loped, their real cause is mostly overlooked—it is no unusual matter, to hear parents express their surprise and concern, at the presence of scrofula in their children; and to hear them give as a reason, that no such complaint had before appeared in their families—in these cases, I have discovered, more than once, that calomel had been the domestic medicine.—No doubt, difficulties may be started against the explanation of the appearance of scrofula, on the ground of the general exhibition of mercury; nor, is it pretended, that it arises on every such abuse of this remedy; I simply maintain, that it supervenes to its use, in cases, where no other cause could be assigned; and, that it is evolved in others, where it might have remained undeveloped.

And, to shew that this dangerous prepossession in favour of calomel, is not confined to the treatment of bilious or liver-complaints; we have only to look at the unsuccessful practice of those, who placed confidence in its virtues, in the cure of the fever and other diseases of our troops, on their return from Spain and Walcheren.

But, while calomel is considered as a specific for the complaint called Bilious; few are agreed as to the quantity, in which it should be exhibited, or, as to its mode of operation; some give it in small doses to correct the bile; others, in large ones to absorb or extract the bile from, or, to emulge the biliary ducts; and,
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in a dark age, the terms, *emulge*—*specific*—and such like; were held as explanatory of unknown or even inexplicable phenomena—in a more enlightened one, they were examined and condemned as erroneous; and, strange to say, at a still brighter period, they are revived.

Calomel, in large doses, acts as a purgative, and thus, may prove serviceable; but, it is not thence entitled to a greater degree of credit, than other purgatives of an active quality: if the duodenum have been obstructed, this obstruction removed, the biliary and pancreatic fluids flow with ease into the intestines and relief is obtained; but, the same effect would follow the administration of other cathartics, given in suitable doses—purgatives unload the bowels, in the first instance—frequently repeated, or violent in operation, they carry off the chyle, over-excite the glands and exhalants of the intestines, and cause an abstraction of those fluids, which should go to the support of the body—the consequences are, emaciation, debility and irregular fever—some purgatives are considered to be more active than others; they differ, however, chiefly according to the dose and manner in which they are administered—those called drastic, are scammony, gamboge, calomel, jalap, colocynth, &c.—which, taken in small doses, or mixed with substances that blunt their acrimony, are slow and gentle in their operation—in large doses, or in a rough form, they purge briskly, or gripe violently, or both—on

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the other hand, the purgatives, denominated the milder; as castor-oil, rhubarb, the neutral salts, &c.—exhibited in large quantity, act as drastics—still, however, the effects produced by both the mild and drastic, are the same;—an evacuation of the contents of the bowels, in the first instance—an abstraction of fluids, and a wasting of flesh and strength, in the second.—The bowels, small and large, constitute one long convoluted canal, each portion of which is closely allied to its neighbouring one, through the medium of fibres, nerves and blood-vessels—remove from this canal some obstructing body, or empty any portion of it, and the whole or remaining parts will be relieved and better fitted to discharge their offices—colics arising from constipation, or other causes, are cured alike by the drastic or milder purgatives, and where the former fail, the latter succeed, and vice versa:—if the pancreas or liver be overloaded by their respective secretions; whether the obstructing cause exist in the ducts, in the organs themselves, or in some morbid condition of the fluids, the neutral salts, castor-oil or rhubarb, are as likely to prove useful as scammony, gamboge or calomel—if the whole of the abdominal viscera be torpid, they are equally well excited to a healthy action, by the long-continued use of the gentle, as of the active cathartics—in the diarrhœa and dysentery of these countries; in the fluxes of the tropics; the fœces, on the exhibition of purgatives, vary considerably in colour and consistence; but these varieties

varieties do not depend on the purgative employed, but on the nature of the disease, on the quality of the food, on the constitution of the patient and of the atmosphere; and, on the state of the secretions poured into and from the alimentary canal; and, where the disease is curable, it yields as readily to fit doses of the mild as of the more acrid cathartics—such are the considerations which induce me to conclude that purgatives have one common effect, and that the distinctions commonly drawn betwixt them, are more imaginary than real.

But, though it appear, that these distinctions are ill-founded; and that calomel can only rank as a purgative; yet, owing to certain peculiarities of constitution, the same purgative is not equally well-adapted to every habit—in the scrofulous and gouty, for example, or, in cases of weakness or irritability of the alimentary canal; it often happens, that the neutral salts produce nausea and gripes, and diffuse a sense of languor and coldness throughout the frame; in such instances, the warmer purgatives as the electuary of scammony, the tinctures of senna, rhubarb, &c. are more safe and certain in their operation—as the saline, however, are held by many practitioners, to be superior to all others in liver and bilious-complaints—they may, perhaps, agree with the stomach, and fully answer the end, if taken dissolved in some aromatic water, or, in broth seasoned with capsicum.

Cathart-

Cathartics have been frequently recommended, and they deservedly rank among our first remedies in the treatment of the various diseases mentioned;—it may be proper, however, to observe, that it is necessary to fix limits to their use—in the robust and melancholic, accustomed to full living, and where the strength is but little impaired, they may be given with freedom and safety; but, in the debilitated and irritable; in those of a strumous habit, or morbidly sensible nerve, it becomes requisite to administer them with caution and discrimination.

HYDATIDS, WORMS, AND EARTHY CONCRE- TIONS OF THE LIVER.

OF the nature or cure of the above complaints, little is understood.—What I wish particularly to observe, is, that they sometimes cause a sense of weight and uneasiness in the region of the liver, and may give rise to jaundice, chronic hepatitis or schirrus; the existence of any of which will lead, according to the present system, to the active employment of mercury.—A little reflection however, must render it obvious, that mercury cannot, under such circumstances, be of any avail; because it is incapable of removing the original malady; and, as it has been shewn to be not only a stimulating, but a debilitating

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remedy, the consequence of its introduction will be, an aggravation of former diseases, the production of new ones, and a reduction of health and strength.

CANCER OF THE LIVER.

Cancer lays hold of the womb, the stomach and of various parts and glands of the body.—Does it not, also, attack the liver?—The component parts of this viscus are similar to those of other organs seized with this disease.—On the ground of structure, therefore; or, indeed, of any known law of the animal œconomy, no reason can be assigned for its non existence in this organ; yet, authors of celebrity and practitioners of eminence pass it over in silence.

Were I to form an opinion of the frequency of this complaint, from my own experience, I should be inclined to think, that, though an obscure, it is, by no means, a very rare one—I conceive that I have met with three cases of this kind, which I shall now relate.

C A S E.

Mr. C. aged 50, of a melancholic temperament and strumous habit, for several years, complained of pain in the right hypochondre, occasionally shooting towards
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the right shoulder, accompanied by the various symptoms which denote considerable derangement of the natural functions.—Within the last four months, the pains have become more violent and lancinating; they come on instantaneously, and often so acutely, that he gives an involuntary shriek, and is obliged if walking, to stop short; he presses his hand upon the part affected, and sometimes throws himself down in agony upon the floor.—A low degree of fever is present; during the paroxysm the pulse is little disturbed, but the countenance expresses torment of body and anguish of mind.—The bowels are constipated, the fœces preternatural, and at times purulent and sanious.—The urine is of a red or coffee colour, the complexion, of a deep mahogany.—This gentleman has been twice salivated—emaciation and increase of fever and pain were the consequences.—Blisters rather aggravate than relieve—opiates and purgatives alone, afford any considerable ease—the muriated tincture of iron improved the appetite, and, for a few weeks, appeared to diminish the violence of the pain—with this medicine he fell out, but, again had recourse to it, and with advantage.—This patient was sent to the country.—His father died of a cancer of the upper lip.

Miss M. aged 36, of a sanguine temperament and strumous habit, complained, for seven years, of shooting pains in the right hypochondre—not long ago, these pains became

became acute and lancinating—there was a slow wasting fever—the liver was indurated and diminished in bulk—the bowels were much disturbed, and their contents frequently tinged with purulent or sanious matter—opium, the warm bath and purgatives gave relief—the acetated tincture of iron, taken in asses milk, strengthened the stomach, and, for a time, seemed to check the tendency to hectic—thrice she had been salivated by three different practitioners—a fourth course of mercury was proposed, to which she gave a decided negative; so much had she suffered from the three former.—She was advised to try the effects of a milk diet and of country air.—The mother of this lady was scrofulous and died of a cancer of the breast.

Mr. M. aged 46, of a strumous constitution, sedentary life and social habits, complained, for twenty years, of being bilious, of occasional fugitive pains in the right side, and of a torpid state of the bowels—during the last ten years of his life, he was subject to frequent attacks of colic, and to more fixed and violent pains in the great lobe of the liver—the pain sometimes was felt in the right shoulder—twice he laboured under jaundice, and for months before his death, under hectic fever—the remedies administered in the first instance, were purgatives, bitters and mercurials, and with apparent good effects; but the symptoms returned with increased violence

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—at length, acute and lancinating pains seized the liver—these pains, at one time, were likened to an attack of gout in the stomach; at another, to the torment felt on the application of boiling water or melted lead; or, on the amputation of a limb—the bowels were constipated and their contents varied considerably; now of a pitchy colour and consistence, again brownish, purulent, sanious or watery—towards the close of the complaint, the right lobe of the liver was diminished in size, though before, it had been much enlarged; and the paroxysms of pain became more frequent—low delirium succeeded, the mind occasionally lost its balance, and temporary fits of insanity came on—at such a stage of such a disease, it might be presumed, that mercury would not be thought of; but, so great is our attachment to this favourite medicine, that it was the only one prescribed in consultation—and, here, to do justice to mercury, I shall observe, that, in this instance, it had a good effect; for, it put a more speedy termination to the sufferings of the patient.—The expression of countenance in this disease is deserving of attention—it is difficult of description, but once observed not readily forgotten—dejected, penetrating and interesting—perhaps, no other malady is characterised by such a complete extinction of hope; neither the pleasures of a home nor of society are enjoyed or endured—involuntary tears and sighs burst forth—the cares of this world are forgotten, while the patients countenance faithfully expresses

presses the image ever present to his imagination—the gloomy silence of the tomb.

If lancinating pains suddenly coming on and suddenly disappearing, and a sanious and purulent discharge succeeding to long-continued schirrus, constitute the complaint called cancer, are not the cases above related of that nature?

SIMPLE ENLARGEMENT OR HARDNESS OF THE LIVER.

This is a common complaint, and is often mistaken for schirrus; both sexes, and all ages and temperaments are subject to it; especially those of a plethoric habit, and delicate females of sedentary lives. It is induced by weakness and irritability of the alimentary canal, by indolence, by too spare or too full a diet, by the violent or depressing passions, by intemperance, and by fevers, intermittent, remittent, or continued.—The natural functions are primarily and principally affected—if the disease proceed to any height, the animal and vital become disturbed.

In order to discriminate simple enlargement or hardness, from scrofulo-schirrus of the liver, we may observe, that the former is not an hereditary complaint, that the constitution of those attacked is not scrofulous, and that the symptoms are less violent, and yield more readily to medicine,

cine, even to such as might aggravate the latter. The mode of treatment is simple—in children, a cure is generally effected by the use of purgatives, and of the tepid and cold baths, by frictions of the abdomen, by exercise in the open air, and by a light and nutritious diet—much the same plan is to be observed in the treatment of adults of relaxed habits, and who have lived on a low watery diet; to which we may subjoin, the use of wine, bark and chalybeates—if these fail, recourse may be had to mercury.—In the full plethoric habit, induced by sloth and high living, the cure will depend on exercise and abstinence, and on the moderate exhibition of cathartics.

I have enumerated fevers of different kinds among the causes of this complaint—and, now, in order to shew their influence, especially that of the intermittent, on the biliary system, it may be proper to make the following observations. During the spring season of the last three years, I prescribed for better than a hundred patients, ill of the regular and irregular tertian, quartan, and quotidian fever—many of these were cases of long standing, and in such, the liver was enlarged or indurated, or both—in a few, there were symptoms of low inflammation—in several, there was jaundice; in two of the strumous habit, scrofulo-schirrus was produced, which every endeavour to remove proved ineffectual—many of the patients now mentioned were relieved at St. George's Dispensary—they

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came from the neighbourhood of Drumcondra, Clontarf, Malahide and Fingal.—Whole families were attacked, men, women and children, and the complaint was more violent and difficult of cure in the males than in the females. Of these hundred patients, about thirty were labourers, the remainder were weavers, spinners and servants; not one in twenty was a drunkard, and not one of the entire, had previously laboured under any liver-complaint—here, the diseased biliary action stood in the relation of effect with respect to the intermittent; at the same time I must remark, that in every instance where the liver was much engaged, the intermittent was rendered thereby still more tedious and unmanageable.

What has just been advanced with regard to the Intermittent Fever will apply to the continued; in which, the uneasiness or pain, felt on the pressure of the right hypochondre, and of the epigastric region, and so generally ascribed to low inflammation or irritability of the stomach, seems to me, to depend more frequently on over-excitement of the vessels of the liver—and, in this opinion, I am supported by the occasional presence of symptoms of hepatitis, or yellow fever, which accompany the typhus gravior, particularly during part of our summer and autumn months—the inference to be hence drawn, is obvious and important—our attention should be more frequently directed to the disturbed state of the biliary organ

organ in fever, which, though an effect only, in the first instance, may yet, in the course of the complaint, where matters are nearly balanced, turn the scale against the patient, if not attended to and corrected—in such cases the application of stupes, leeches or blisters in the neighbourhood of the liver, and the full administration of purgatives have been extremely beneficial.

DO WINE AND SPIRITUOUS LIQUORS OPERATE SPECIFICALLY IN THE PRODUCTION OF LIVER-COMPLAINTS?

There are no ideas more commonly received, than that liver-complaints are the children of intemperance, and that our ancestors were exempted from them.—That liver-complaints are more prevalent than formerly, is generally admitted.—I have already remarked that the inhabitants of this country are extremely subject to scrofulo-schirrus of this organ—but we cannot therefore say, that wine and spirituous liquors operate specifically in their production; and, in looking at the past and present state of this kingdom, we are fully justified in making the assertion.

Perhaps no nation in the habitable globe, within the same number of years, made such rapid

advances in agriculture and commerce ; in arts, sciences and civilization, as the Irish ;—this period commenced with the declaration of free trade and constitution, at which time the mind of the kingdom assumed a new rank and station ;—the public attention was directed to worthy pursuits, and diverted from ignoble ones—virtue and genius, industry and enterprise were alike encouraged and rewarded—in the generous emulation of worth and talent, the inhabitants began to think and feel—they saw their errors and strove to correct them—drunkenness, their former boast, was now their reproach ; and they have since become, comparatively speaking, a sober people.

Now, had liver-complaints arisen from the use of wine and spirituous liquors, we should conclude, that our ancestors, so far from being exempted from, were more subject to them—the reverse of which is generally acknowledged.—And though we here allow that the nature of these complaints is better understood, yet this will not be considered as sufficient to explain, why they are of late become so universal.—But, in order to prove still farther, that wine and spirituous liquors do not operate specifically in their production, we have only to state, that those who indulge freely in the use of these liquors, are not the most subject to liver-complaints—that they
exist

exist in those who are temperate, and are found even in children and infants.—According to this view of the subject it would appear that when the constitution is sound, wine and spirituous liquors may be taken, for a considerable length of time, without injuring the liver—when they produce this effect, it seems to be, by first diminishing the tone and activity of the stomach; and, hence it is, that the liver when scrofulous is readily acted on, because the stomach partakes of its enfeebled and irregular actions; and therefore, not only wine and spirituous liquors, but many other causes, by debilitating the energy of the stomach, thereby diminish the energy of the liver, and aggravate the irregular actions already existing in that viscus.

CONCLUSION.

Such are the observations I had to make, on the diseases of the liver, and on the evils which result from the indiscriminate use of mercury in their treatment—it further remains to inquire in what particular morbid conditions of this organ, it may be beneficially administered—if the affection be syphilitic, the propriety of its use cannot be questioned—but, in what other cases it should be exhibited, is a matter not so easily determined.—To speak from my own experience, mercury promises to be most useful, where there is a loss of tone and energy in
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the secretory and absorbent vessels of the liver, independent of any scrofulous taint,—and unaccompanied by tubercles, or any disorganization of its substance—under these circumstances, whether it be hardened—whether it be enlarged or diminished in bulk, mercury may be given with safety and advantage—exhibited in small quantity and long continued, it acts as a diffusive stimulus to the entire sanguiferous and lymphatic systems, and the secretory and absorbent vessels of the liver are thus excited and restored to their wonted healthy actions—though this be admitted, still it may be asked,—is the practitioner warranted in giving so active a remedy, without a previous trial of the more safe, and perhaps, equally efficacious ones already enumerated?

I now close what I had to offer—my chief objects were, to check the indiscriminate use of mercury, in diseases of the liver,—and to give some account of the nature and treatment of the scrofulo-schirrus, or consumption of this organ.

If the opinions which I have advanced be founded in truth, they must, from the importance of the subject, be deserving of attention—and even where erroneous, the investigation which leads to the detection of the error, will be attended with advantage.

